

DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

OIL CONSERVATION DIVISION
2040 Pacheco St.
Santa Fe, NM 87505

DISTRICT II
P.O. Drawer DD, Artesia, NM 88210

DISTRICT III
1000 Rio Brazos Rd., Aztec, NM 87410

*Og'id: 180514
Prop. Code: 24648*

WELL API NO.
30-007-20116

5. Indicate Type of Lease
STATE FEE

6. State Oil & Gas Lease No.

SUNDRY NOTICES AND REPORTS ON WELLS
(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.)

7. Lease Name or Unit Agreement Name

1. Type of Well:
OIL WELL GAS WELL OTHER *Water Injection Well*

8. Well No.
VPR'A'-07

2. Name of Operator
Sonat Raton, L.L.C.

9. Pool name or Wildcat

3. Address of Operator
P.O. Box 190 ; Raton, NM 87740

4. Well Location
Unit Letter **B** : **1073.86** Feet From The **North** Line and **2275.90'** Feet From The **East** Line

Section **01** Township **T31N** Range **R19E** NMPM **Colfax** County

10. Elevation (Show whether DF, RKB, RT, GR, etc.)
8275' (GL)

11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>		CASING TEST AND CEMENT JOB <input type="checkbox"/>	
OTHER: _____ <input type="checkbox"/>		OTHER: Moved Location <input checked="" type="checkbox"/>	

12. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE RULE 1103.
Moved drilling well location approx. 450 ft. west from original location. (Original location: 943'FNL/1829'FEL, Sec. 1, 31N19E)

I hereby certify that the information above is true and complete to the best of my knowledge and belief.
SIGNATURE *DR Lankford* TITLE *Patrol Engineer* DATE *6/30/99*
TYPE OR PRINT NAME *Donald R. Lankford* TELEPHONE NO. *(505) 445-4621*

(This space for State Use)
APPROVED BY *Ry Johnson* TITLE **DISTRICT SUPERVISOR** DATE *7/9/99*
CONDITIONS OF APPROVAL, IF ANY:

District I

1625 N. French Dr., Hobbs, NM 88240

District II

811 South First, Artesia, NM 88210

District III

1000 Rio Brazos Rd., Artec, NM 87410

District IV

2040 South Pacheco, Santa Fe, NM 87505

State of New Mexico
Energy, Minerals & Natural Resources Department

Form C-102
Revised March 17, 1999

OIL CONSERVATION DIVISION
2040 South Pacheco
Santa Fe, NM 87505

Submit to Appropriate District Office
State Lease - 4 Copies
Fee Lease - 3 Copies

AMENDED REPORT

WELL LOCATION AND ACREAGE DEDICATION PLAT

1 API Number		2 Pool Code		3 Pool Name			
4 Property Code		5				6 Well Number VPR A \rightarrow 7	
7 OGRID No.		8 Operator Name SONAT RATON, L.L.C.				9 Elevation 8275.0	

10 Surface Location

UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
B	01	T 31 N	R 19E	B	1073.86	NORTH	2275.9'	EAST	COLFAX

11 Bottom Hole Location If Different From Surface

UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County

12 Dedicated Acres 13 Joint or Infill 14 Consolidation Code 15 Order No.

NO ALLOWABLE WELL BE ASSIGNED TO THIS COMPLETION UNTIL ALL INTERESTS HAVE BEEN CONSOLIDATED OR A NON-STANDARD UNIT HAS BEEN APPROVED BY THE DIVISION

16					<p>17 OPERATOR CERTIFICATION</p> <p>I hereby certify that the information contained herein is true and complete to the best of my knowledge and belief</p>	
					Signature <u>DR Lankford</u>	
					Printed Name <u>Donald R. Lankford</u>	
					Title <u>Petrol. Engin.</u>	
Date <u>6/30/99</u>		<p>18 SURVEYOR CERTIFICATION</p> <p>I hereby certify that the well location shown on this plat was placed from field notes of actual surveys made by me or under my supervision, and that the same is true and correct to the best of my belief.</p>				
Date of Survey <u>June 30, 1999</u>		Signature and Seal of Professional Surveyor:				
		Certificate Number 5103				